

**YOU MUST SIGN WAIVER TO RECEIVE NEW
CARD**

MEMBER UPDATE

PLEASE FILL IN AND RETURN WITH 2020 DUES

NAME _____

ADDRESS _____

CITY _____

STATE _____ **ZIP CODE** _____

PHONE NUMBER _____

Email ADDRESS _____

DATE OF BIRTH _____

MEMBER BOND NUMBER _____

Dues for 2020 are as follows:

Please put a check beside your membership status

- Members age 1-17 \$15.00 / year
- Members age 18-60 \$40.00 / year
- Members age 61-71 \$25.00 / year
- Members age 72 & over Free
- Couples \$20.00 each
(Husband & wife both holding shares)

Rifle Range Keyincluded in fee

RANGE KEY will change

**MAKE CHECK PAYABLE AND MAIL DUES TO:
EAST HUNTINGDON SPORTSMEN'S ASSOC.**

**P.O. BOX 521
Scottdale, PA 15683**

East Huntingdon Township Sportsmen's Association

**GENERAL RELEASE OF LIABILITY AND ASSUMPTION OF
RISK**

I, print name _____
do hereby acknowledge, release and forever discharge East Huntingdon
Township Sportsmen's Association of any and all manner of action or
actions, claims suits, damages, judgments and demands of any kind
whatsoever, whether now or in the future, at law or in equity. That results or
may result from Firearms, Bows, Crossbows, and any Weapon or subject
control products used upon the premises or range of or from any training or
instruction by the East Huntingdon Township Sportsmen's Association.

I further acknowledge that the use of Firearms, Bows, Crossbows, and any
Weapon or subject control products is an inherently dangerous activity and
assume the risks of using and employing firearms or other similar products
on the premises and at the firearms ranges, and hold harmless the East
Huntingdon Sportsmen's Assoc. its successors and assigns during any such
activities.

I further acknowledge that the study and application of firearm and archery
techniques and subject control procedures is physically demanding and
requires that I be in good physical condition, and free of any disability or
physical condition that would prohibit my participation. If at any time I feel
or a representative of East Huntingdon Township Sportsmen's Association
feels I need to refrain from any of the activities that I am participating in
due to feeling any type discomfort, or acting in an unsafe manner I agree to
stop said activities immediately.

I further acknowledge that I have read and understood the foregoing
RELEASE OF LIABILITY AND ASSUMPTION OF RISKS.

_____ day of _____, 20____

Signature

Parent or Guardian